

ACR0048-US



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**RESPONSE UNDER 37 C.F.R. 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP NO.: 2645**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of: CHIEN-HSING FANG Serial No.: 09/934,540 Filed: August 23, 2001 For: SWITCHABLE OMNI- DIRECTIONAL ANTENNAS FOR WIRELESS DEVICE	 Art Unit: 2645 Examiner: SMITH, Creighton H.
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AMENDMENT AFTER FINAL

Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on March 23, 2005, please amend the above-identified application as follows:

No extension of time or other fees are believed to be due, except as detailed in the attached documents. However, any extension of time necessary to prevent abandonment is hereby requested, and any fee necessary for consideration of this response is hereby authorized to be charged to Deposit Account Number 50-1390.

Amendments to the Claims: reflected in the listing of claims that begins on page 2 of this paper.

Remarks: begin on page 5 of this paper.

THW
AF

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. ACR0048-US	
Applicant(s): CHIEN-HSING FANG					
Application No. 09/934,540	Filing Date August 23, 2001	Examiner SMITH, Creighton H.	Customer No. 28970	Group Art Unit 2645	Confirmation No. 7821
Invention: SWITCHABLE OMNI-DIRECTIONAL ANTENNAS FOR WIRELESS DEVICE					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	20 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; flex-direction: row-reverse;"><div style="flex: 1; padding-right: 10px;"><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 50-1390 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.</div><div style="flex: 1; padding-left: 10px;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</div></div>					
<div style="display: flex; align-items: center;"><div style="margin-left: 10px;">_____ Signature</div></div>			Dated: May 23, 2005		
Michael Bednarek Registration No. 32,329 PILLSBURY WINTHROP SHAW PITTMAN LLP 1650 Tysons Boulevard McLean, VA 22102			<div>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date)</div> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <div style="text-align: center; font-size: small;">Signature of Person Mailing Correspondence</div> <div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div> <div style="text-align: center; font-size: small;">Typed or Printed Name of Person Mailing Correspondence</div>		
CC:					